Typed or printed name

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents

207-862-4681

P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

maintenance fee notificat		nei wase i	a Diock 1, 09 (2)	, specifying a new c	J			(-,			
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
21553	7590 06/23	/2008									
FASSE PATER P.O. BOX 726 HAMPDEN, MI	I DATE	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.									
			2	2 2000	Μ.	Hellwig	-Hi]		ı	(Depositor's name)	
			12	2008	W	Allerni	1-04	Ul 8/22/	08	(Signature)	
			REAL	ARK OF THE	Au	gust 22,	200	8		(Date)	
APPLICATION NO.	PLICATION NO. FILING DATE			FIRST NAMED INVEN	ITOR ATTORNEY DOCI			NEY DOCKET NO.	CKET NO. CONFIRMATION NO.		
10/566,288 01/26/2006				Wolfgang Gleine	08/25/2008 H893RCTP 02302044 165645518						
TITLE OF INVENTION	: DEVICE FOR TESTIN	NG CAB	IN PARTS OF C	OMMERCIAL AIRC	RAF	91 FC	:1501 :1504	•		1440.00 OP 302.03 OP	
APPLN. TYPE	SMALL ENTITY	SMALL ENTITY ISS		PUBLICATION FEE DUE		PREV. PAID ISSUE FEE		TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	NO	\$1440		\$300		SO		\$1740		09/23/2008	
EXAMINER			ART UNIT	CLASS-SUBCLASS				•			
KWOK, HELEN C			2856 073-583000			•					
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE	PRINTED ON T	THE PATENT (print	or typ	oe)					
	less an assignee is ident th in 37 CFR 3.11. Com	tified be pletion o	ow, no assignee f this form is NO						ocument	has been filed for	
(A) NAME OF ASSI		<u> </u>		(B) RESIDENCE: (_	LOUNT	KT)			
Alrbus D	eutschland	Gmbh	•	Hamburg	, (Germany					
Please check the appropr	riate assignee category of	r categor	ies (will not be pr	rinted on the patent):		Individual 🖾 Co	orporati	on or other private gr	oup entity	y Government	
4a. The following fce(s) Sissue Fee Publication Fee (I) Advance Order -	No small entity discount		d)	b. Payment of Fee(s): A check is enclo Payment by cred The Director is h overpayment, to	sed. lit car	d. Form PTO-2038	3 is atta	ched.			
5. Change in Entity Sta	itus (from status indicate	d above)								
• • •	ns SMALL ENTITY stat							TITY status. See 37 C			
NOTE: The Issue Fee ar interest as shown by the	nd Publication Fee (if req records of the United St	prired) wates Pate	ill not be accepted nt and Trademark	d from anyone other to Office.	than t	he applicant; a regi	istered a	nttorney or agent; or the	ne assign	ee or other party in	
Authorized Signature	Wall	3/	Har	Ke		Date Aug	gust	22, 2008			
Typed or printed nam	walter F	. Fa	sse			Registration N	No. 3	6132			

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



ASSE PATENT ATTORNEYS, P.A.

207-862-4681

WALTER F. FASSE

60-G MAIN ROAD NORTH, P.O. BOX 726 HAMPDEN, MAINE 04444-0726 U.S.A. TELEPHONE: TELEFAX:

207-862-4671 207-862-4681 WOLFGANG G. FASSE

Of Counsel

TELEFAX COVER SHEET

DATE: August 22, 2008

TO: MS ISSUE FEE

COMMISSIONER FOR PATENTS

FAX NO.: 571-273-2885

FROM: WALTER F. FASSE, ESQ.

FASSE PATENT ATTORNEYS, P.A.

RE: Applicant: Wolfgang GLEINE

Our Case No: 4893

USSN: 10/566,288

Filed: January 26, 2006

Title: Device for Testing Cabin Parts of Commercial Aircrafts

TOTAL NUMBER OF SHEETS BY TELEFAX: 3 (INCLUDING COVER SHEET)

NOTE: We are enclosing:

- a) Issue Fee / Publication Fee Transmittal (Form PTOL-85);
- b) Credit Card Payment (Form PTO-2038) (\$1740.00);
- c) Transmittal of Supplemental Declaration;
- d) Supplemental Declaration.

W.F.Fasse

CERTIFICATE OF FAX TRANSMISSION:

Req. No.: 36132

I hereby certify that this correspondence with all indicated enclosures is being transmitted by telefax to 571-273-2885 on the date indicated below, and is addressed to: Commissioner for Patents, Alexandria, VA 22313-1450

u selling-stilly pus. 22,08

M. Hellwig-Hill - August 22, 2008

This communication may contain confidential and legally privileged information, and is intended only for the Identified recipient. All other persons are prohibited from reading, using, copying or disseminating this communication and the information contained herein. Please contact the sender if you are not the identified recipient and have received this communication in error.